### **Program Questions:**

# HCR - Community Development Block Grant (CDBG) - Microenterprise Assistance (Open Round)

### Q\_9431

Is the applicant an eligible New York State non-entitlement municipality?

- Question Type: Threshold
   Required: Yes
   Answer Type: Yes/No
   Question Requirements:

A list of eligible NYS Community Development Block Grant (CDBG) applicants is available online, here: https://hcr.ny

# Q\_3388

Is the applicant applying to establish a local Microenterprise Grant Program's

- Question Type: Threshold
   Required: Yes
   Answer Type: Yes/No
   Question Requirements:

The CDBG Microenterprise Program provides funds to eligible local governments to assist qualifying businesses undertake activities that result in the creation of job opportunities for persons from low to moderate income families. The NYS CDBG Microenterprise resources are to support and foster the development of microbusinesses by providing grants in conjunction with capacity building and entrepreneurial assistance.

For the purposes of the NYS CDBG Microenterprise Program, a microenterprise is defined as a commercial enterprise that has five (5) or fewer employees, one (1) or more of which is the principal and owns the enterprise at the time of application. This includes part-time and full-time employees.

An eligible microenterprise is a private, for-profit business entity; corporations, partnerships, and sole proprietorships that are legal, licensed and operating. Not-for-profit entities are not microenterprises

#### O 3423

Will the proposed program assist not-for-profit entities?

- Question Type: Threshold
   Required: Yes
   Answer Type: Yes/No
   Question Requirements:

A microenterprise is a private for-profit business entity; corporation, partnership, or sole proprietorship that is legal, licensed and operating. Not-for-profit entities are not microenterprises

#### Q 3326

Will the CDBG funds be used toward eligible project costs?

- Question Type: Threshold
   Required: Yes
   Answer Type: Yes/No
   Question Requirements:

Eligible uses of NYS CDBG Economic Development Program funds include, but are not limited to, acquisition of real property; the financing of machinery, furniture, fixtures and equipment; building construction and renovation; working capital; inventory; and employee training expenses.

Eligible uses of NYS CDBG Small Business Program funds include, but are not limited to, acquisition of real property; the financing of machinery, furniture, fixtures and equipment; building renovation; working capital; inventory; and employee training expenses. New construction is not eligible under the NYS CDBG Small Business Program.

Eligible uses of NYS CDBG Microenterprise Program funds include, but are not limited to, the financing of machinery, furniture, fixtures and equipment; working capital; inventory; and reimbursement of the cost for a grantee to attend the entrepreneurial training program. Construction, building, or other improvements are not eligible uses of NYS CDBG Microenterprise Program funds when Davis Bacon and Related Acts must be applied.

For all programs, the use of NYS CDBG funds toward construction and renovation costs are subject to Davis Bacon Wage Rate requirements. This includes the cost of equipment that requires installation, as well as the purchase of materials used for construction

#### Q 3941

Will the proposed program only support microenterprise projects that will either create jobs for low- to moderate-income (LMI) persons or assist a business owner who is LMI?

- Question Type: Threshold Required: Yes
- Answer Type: Yes/No
   Question Requirement

1) By creating a minimum of one (1) permanent full-time equivalent job for persons from LMI families. If more than one (1) FTE job is created as a result of NYS CDBG assistance, a minimum of fifty-one percent (51%) of the jobs must benefit persons from LMI families.

2) If the beneficiary/entrepreneur receiving the grant qualifies as LMI himself/herself. For microbusinesses that are owned and operated by more than one individual, a majority of the owners must qualify as LMI in order to meet the National Objective

\*A business owner cannot be counted towards job creation

#### O 3320

Does the proposed activity include assistance to a for-profit business in the form of lobbying or other political activities?

Lobbying and political activities are not eligible under Section 105(a)(17) of the Housing and Community Development Act of 1974.

- Question Type: Threshold
   Required: Yes
   Answer Type: Yes/No

### O 3321

Does the proposed activity include planning for economic development projects, including conducting market surveys to determine an appropriate type of business to attempt to attract to a particular area, developing individual commercial or industrial project plans and identifying actions to implement those plans?

The above activities are not eligible under Section 105(a)(17) of the Housing and Community Development Act of 1974.

- Question Type: Threshold
   Required: Yes
   Answer Type: Yes/No

# O 3416

Will an entrepreneurial training program for microenterprise grantees be developed by the applicant or chosen from existing training programs prior to finalization of this application?

- Question Type: Threshold
   Required: Yes
   Answer Type: Yes/No
   Question Requirements:

Each microenterprise owner that is awarded a grant must complete an entrepreneurial training class prior to incurring project costs and requesting CDBG grant funds. Owner(s) of the microenterprise must attend the entrepreneurial training. Attendance by the employees does not satisfy this requirement. If the microenterprise is owned and operated by more than one individual, at least one person must complete the training program.

The training requirement must be a classroom-style training that teaches the fundamentals of owning and operating a business. The training program should help entrepreneurs develop business skills. At minimum, the training program should consist of the following elements:

- Developing a business plan
   Legal issues
   Taxes
   Recordkeeping
   Accounting
   Financing
   Marketing and advertising
   Employee issues

As part of this application, the Applicant will need to attach a draft syllabus for the entrepreneurial training program selected to satisfy this requirement

#### Q 6406

Will the program delivery, administration, and training costs combined equal 15% or less of the total CDBG request? Refer to the Scoring Tips section for additional guidance.

- Question Type: Threshold
   Required: Yes
   Answer Type: Yes/No
   Question Requirements:

For Microenterprise Programs, administrative, program delivery and training costs cannot exceed a total of 15% of the total CDBG request. Of the 15% maximum, administrative costs cannot exceed 5% of the total CDBG request

#### Q\_3325

Will any of the costs identified in the application budget be incurred prior to award?

- Question Type: Threshold
   Required: Yes
   Answer Type: Yes/No
   Question Requirements:

If any project costs, regardless of their funding source, are incurred prior to the CDBG award date and the approval of the Request for Release of Funds by the Office of Community Renewal, the entire project may be deemed ineligible for CDBG funds

#### Q 13171

Will the proposed project be complete within 24 months from project award?

- Question Type: Threshold
   Required: Yes
   Answer Type: Yes/No
   Question Requirements:

Pursuant to the NYS CDBG Program, applicants should only apply for the amount of funding that can be fully expended and the type of activities that can be completed within the specified project completion period of twenty-four (24) months. Applicants should not proceed with a project that cannot be completed within the specified timeframe or with the assumption that an extension of the project deadline will be considered.

All proposed job creation, or low- to moderate-income owner assistance must be completed, and all accomplishments must be reported to the Office of Community Renewal within the twenty-four month project completion period.

### Q 972

Project county or counties

- Question Type: Location
   Required: Yes
   Answer Type: NYS County Multiple Choice

### Q 184

NYS Assembly District where the project is located. (This question's value will be filled automatically, based on the project address, when the application is finalized.)

- Question Type: Location
   Required: No
   Answer Type: Integer

# Q\_190

NY Senate District where the project is located. (This question's value will be filled automatically, based on the project address, when the application is finalized.)

- Question Type: Location
   Required: No
   Answer Type: Integer

### Q 3527

US Congressional District where the project is located. (This question's value will be filled automatically, based on the project address, when the application is finalized.)

- Question Type: Location
   Required: No
   Answer Type: Single Choice Dropdown
   Choice Options: 1,2,3,4,5,6,7,8,9,10,11,12,13,14,15,16,17,18,19,20,21,22,23,24,25,26,27
   Question Requirements:

To determine the US Congressional District, click HERE

# Q\_928

Project Street Address: Please input the project street address (Street Number and Street Name only).

If the project has multiple locations, please input the primary street address of the project. If the project does not have a definite street address, please input the approximate street address of the project (Street Number and Street Name only).

- Question Type: Location
   Required: Yes
   Answer Type: Short Answer

### Q 565

Project City

- Question Type: Location
   Required: Yes
   Answer Type: Short Answer

Project State

- Question Type: Location
   Required: Yes
   Answer Type: Single Choice Dropdown
   Answer Type: Single Choice Dropdown
   Choice Options: AA,L,AK,AZ,AR,CA,CO,CT,DE,FL,GA,HI,ID,IL,IN,IA,KS,KY,LA,ME,MD,MA,MI,MN,MS,MO,MT,NE,NV,NH,NJ,NM,NY,NC,ND,OH,OK,OR,PA,RI,SC,SD,TN,TX,UT,VT,VA,WA,WV,WI,WY,AS,DC,FM,GU,MH,MP,PW,PR,VI
   Default Answer AA

#### Q 1034

Project ZIP Code. (please use ZIP+4 if known)

- Question Type: Location
   Required: Yes
   Answer Type: Short Answer
   Question Requirements:
- To locate a Zip Code, click HERE

### Q\_616

For more than one project location, please provide full address(es) for each location. If Not Applicable, indicate "NA".

- Question Type: Location
   Required: Yes
   Answer Type: Long Rich Text (HTML)
   Characters: 1 200

# Q\_572

Project Latitude (This question's value will be filled automatically, based on the project address, when the application is finalized.)

- Question Type: Location
   Required: No
   Answer Type: Decimal

#### Q 573

Project Longitude (This question's value will be filled automatically, based on the project address, when the application is finalized.)

- Question Type: Location
   Required: No
   Answer Type: Decimal

### Q\_549

Type of Applicant (select all that apply)

- Question Type: Basic
   Required: Yes
   Answer Type: Multi Choice
   Answer Type: Multi Choice
   Answer Type: Multi Choice
   Choice Options: Federal, State, County, City, Town, Village, Tribal, School District, County or Town Improvement District, District Corporation, For-Profit, Individual, S Corporation, C Corporation, IDA, LDC, LLC, LLP, Public Authority,
  Public Benefit Corp, Sole-Proprietorship, BID, LP, Boards Of Cooperative Educational Services (BOCES), Fire District, Regional Planning and Development Board, Public Library, Association Library, College/University/Community College

#### Q 12603

Is the applicant a DBA?

- Question Type: Basic
  Required: Yes
  Answer Type: Yes/No
  This is a conditional question.

  I. If Yes is selected then Q\_550 will be displayed

# Q\_550

What is the applicant's DBA name?

- Question Type: Basic
  Required: No
  Answer Type: Short Answer
  This is a conditional question based on the answer to Q\_12603. This question displays when selecting the answer: "Yes"

#### Q 556

Select an applicant ID type from the list below that you normally use to identify your organization on application forms.

- ext an approximation to the following the specified ID number upon request by the funding agencies.

### Q\_2655

Based on your selection from the previous question, enter the assocaited ID number

- Question Type: Basic
   Required: Yes
   Answer Type: Short Answer

#### Q 969

If you are a business, have you been certified as a New York State Minority or Women-owned Business Enterprise (MWBE)?

- Question Type: Basic
   Required: Yes
   Answer Type: Single Choice Radio Button
   Choice Options: Yes, No, N/A

Organization Legal Name

- Question Header: Applicant Information
   Question Type: Basic
   Required: Yes
   Answer Type: Short Answer
   Question Requirements:

If applying in the name of a business please type in the name as it appears on your business papers. If applying as an individual insert your name here.

# Q\_5416

Applicant First Name

- Question Type: Basic
   Required: Yes
   Answer Type: Short Answer

### Q\_5417

Applicant Last Name

- Question Type: Basic
   Required: Yes
   Answer Type: Short Answer

# Q\_551

Applicant Street Address

- Question Type: Basic
   Required: Yes
   Answer Type: Short Answer

### Q\_552

Applicant City

- Question Type: Basic
   Required: Yes
   Answer Type: Short Answer

### Q\_553

Applicant State

- Question Type: Basic
   Required: Yes
   Answer Type: State Dropdown

# Q\_554

Applicant ZIP Code. (please use ZIP+4 if known)

- Question Type: Basic
  Required: Yes
  Answer Type: Long Answer
  Characters: 5 10
  Question Requirements:

To look up a zip code, click HERE

# Q\_651

Applicant Telephone Number (please include area code)

- Question Type: Basic Required: Yes Answer Type: Phone

# Q\_555

Applicant Email Address

- Question Type: Basic
   Required: Yes
   Answer Type: Email

# Q\_5257

Contact Salutation

- Question Type: Basic
   Required: No
   Answer Type: Single Choice Dropdown
   Choice Options: Mr., Mrs., Ms., Dr.

# Q\_547

Contact First Name

- Question Type: Basic
   Required: Yes
   Answer Type: Short Answer

### Contact Last Name

- Question Type: Basic
   Required: Yes
   Answer Type: Short Answer

### Q\_1050

#### Contact Title

- Question Type: Basic
   Required: No
   Answer Type: Short Answer

# Q\_5490

# Primary Organization

- Question Type: Basic
   Required: No
   Answer Type: Short Answer

### Q\_3688

#### Contact Street Address

- Question Type: Basic
   Required: Yes
   Answer Type: Short Answer

# Q\_3689

# Contact City

- Question Type: Basic
   Required: Yes
   Answer Type: Short Answer

### Q\_3690

#### Contact State

- Question Type: Basic
   Required: Yes
   Answer Type: State Dropdown

# Q\_3691

### Contact ZIP Code (please use ZIP+4 if known)

- Question Type: Basic
   Required: Yes
   Answer Type: Short Answer

# Q\_562

# Primary Contact Phone Number. (please include area code)

- Question Type: Basic
   Required: Yes
   Answer Type: Phone

# Q\_3692

# Contact Email

- Question Type: Basic Required: Yes Answer Type: Email

### Q\_5475

# Contract Salutation

- Question Type: Basic
  Required: No
  Answer Type: Single Choice Dropdown
  Choice Options: Mr., Mrs., Ms., Dr.

# Q\_5476

# Contract First

- Question Type: Basic
   Required: Yes
   Answer Type: Short Answer

# Q\_5477

- Question Type: Basic
   Required: Yes
   Answer Type: Short Answer

- Question Type: Basic Required: No

• Answer Type: Short Answer

# Q\_5491

Authorized Organization

- Question Type: Basic
   Required: No
   Answer Type: Short Answer

# Q\_5479

Contract Street

- Question Type: Basic
   Required: Yes
   Answer Type: Short Answer

# Q\_5480

Contract City

- Question Type: Basic
   Required: Yes
   Answer Type: Short Answer

### Q\_5481

Contract State

- Question Type: Basic
   Required: Yes
   Answer Type: State Dropdown

### Q 5482

Contract Zip (please use ZIP+4 if known)

• Question Type: Basic
• Required: Yes
• Answer Type: Short Answer

# Q\_5483

Contract Phone (please include area code)

- Question Type: Basic
   Required: Yes
   Answer Type: Phone

### Q\_5484

Contract Email

- Question Type: Basic Required: Yes Answer Type: Email

# Q\_5493

Additional Salutation

- Question Type: Basic
   Required: No
   Answer Type: Single Choice Dropdown
   Choice Options: Mr., Mrs., Ms., Dr.

# Q 1052

Additional Project Contact First Name

- Question Type: Basic
   Required: No
   Answer Type: Short Answer
- Q\_970

Additional Project Contact Last Name

- Question Type: Basic
   Required: No
   Answer Type: Short Answer

# Q\_1051

Additional Contact Title

- Question Type: Basic
   Required: No
   Answer Type: Short Answer

# Q\_5492

Additional Organization

- Question Type: Basic
   Required: No
   Answer Type: Short Answer

#### Q 3693

Additional Contact Street Address

- Question Type: Basic
   Required: No
   Answer Type: Short Answer

# Q\_3694

Additional Contact City

- Question Type: Basic
   Required: No
   Answer Type: Short Answer

### Q 3695

Additional Contact State

- Question Type: Basic
   Required: No
   Answer Type: State Dropdown

#### Q 3696

Additional Contact ZIP (please use ZIP+4 if known)

- Question Type: Basic Required: No
- Answer Type: Short Answer

### Q 3697

Additional Contact Telephone Number (please include area code)

- Question Type: Basic Required: No Answer Type: Phone

# Q\_561

Additional Contact Email Address

- Question Type: Basic Required: No Answer Type: Email

# Q 4199

Please select the primary sector or characterization that best defines this project.

- Question Type: Basic
   Required: Yes
   Answer Type: Single Choice Dropdown
   Choice Options: Agriculture, Arts/Culture/Cultural Institutions, Biomedical/Medical, Community Development, Education/College/University, Energy, Environment, Financial Services, Food/Beverage, Healthcare, Historic Preservation, Hospitality, Housing, Industrial/Manufacturing, Information Technology Services/Communications, Infrastructure, Municipal/Government, Office, Recreation, Research & Development, Tourism/Travel, Transportation, Water/Wastewater/Sewer, Waterfront Revitalization, Workforce Development, Business Development, Technology Commercialization

### Q\_4198

Please select the secondary sector or characterization that best defines this project.

- Question Type: Basic
   Required: Yes
   Answer Type: Single Choice Dropdown
   Answer Type: Single Choice Dropdown
   Choice Options: Agriculture, Arts/Culture/Cultural Institutions, Biomedical/Medical, Community Development, Education/College/University, Energy, Environment, Financial Services, Food/Beverage, Healthcare, Historic Preservation, Hospitality, Housing, Industrial/Manufacturing, Information Technology Services/Communications, Infrastructure, Municipal/Government, Office, Research & Development, Tourism/Travel, Transportation, Water/Wastewater/Sewer, Waterfront Revitalization, Workforce Development, Technology Commercialization

#### Q 575

Project Description. Concisely describe the project, indicating the location, what will be planned, designed, acquired, and/or constructed, the issues/opportunities to be addressed, and expected outcomes and deliverables. Additional details will be collected later in the application process.

- Question Header: Project Description
   Question Type: Basic
   Required: Yes

- \*Acquired: 1es
  -Answer Type: Long Rich Text (HTML)
  -Characters: 1 1200
  -Question Requirements: Please includes details relevant to all programs on this application. Programs on this application are: {{program\_list}}

Statement of need: Provide a brief summary of the need for the project in the geographic area proposed and the project's financing needs, including funding gaps of the proposed project

- Question Type: Basic
  Required: Yes
  Answer Type: Long Rich Text (HTML)
  Characters: 1 850
  Question Requirements:

Provide a brief summary of the need for the project in the geographic area proposed, the project's financing needs, including funding gaps and, where applicable, describe the additional short and long term jobs that will be created through the development of the proposed project.

# Q\_12626

Does the project align with the Regional Economic Development Council's Strategic Plan?

- Question Type: Basic
  Required: Yes
  Answer Type: Yes/No
  This is a conditional question.

  I. If Yes is selected then Q\_12627 will be displayed

Explain how the project aligns with the Regional Economic Development Council's Strategic Plan.

- Question Type: Basic
   Required: Yes
   Answer Type: Long Rich Text (HTML)
   Characters: any
   This is a conditional question based on the answer to Q\_12626. This question displays when selecting the answer: "Yes"
   Question Requirements:

Describe how the proposed project advances the REDC/URI plan for the region, specifically linking the project to the region's goals, strategies, and targeted industry clusters. A response to this question should directly and specifically link the project to a section or sections of REDC/URI plan for the region.

### Q\_929

Current State of Project Development (i.e. planning, preliminary engineering, final design, etc. You may enter N/A for non-project related applications)

- Question Type: Basic
   Required: Yes
   Answer Type: Short Answer

#### Q 975

Estimated Project Timeline: include project start/completion dates, estimates for design, permitting and construction or other major steps.

- Question Type: Basic
   Required: Yes
   Answer Type: Long Rich Text (HTML)
   Characters: 1 850

#### Q 580

Provide a list of all federal, state, and local reviews, approvals, or permits needed or completed, including the dates when they are expected to be completed or were completed. If Not Applicable, indicate "NA".

- Question Type: Basic
   Required: Yes
   Answer Type: Long Answer
   Characters: 1 400

#### Q 12606

Does this project require State and/or Federal Environmental Review?

- Question Type: Basic
  Question Type: Basic
  Required: Yes
  Answer Type: Yes/No
  This is a conditional question.

  I. If Yes is selected then these questions will be displayed:
  -0\_2364
  -0\_12607.

#### O 2364

What is the status of State and/or Federal Environmental Review?

- Question Type: Basic
   Required: No
   Answer Type: Short Answer
   Answer Type: Short description based on the answer to 0\_12606. This question displays when selecting the answer: "Yes"

# Q 12607

Please indicate the lead agency (if applicable).

- Question Type: Basic
  Required: No
  Answer Type: Short Answer
  This is a conditional question based on the answer to O\_12606. This question displays when selecting the answer: "Yes"

#### Q 12604

Has a National Environmental Policy Act (NEPA) Record of Decision been issued?

- Question Type: Basic
  Required: Yes
  Answer Type: Yes/No
  This is a conditional question.

  I. If Yes is selected then Q\_1054 will be displayed

### Q\_1054

Please explain decision and include date of Record of Decision.

- Question Type: Basic
   Required: No
   Answer Type: Long Rich Text (HTML)
   Characters: 0 · 850
   This is a conditional question based on the answer to Ω\_12604. This question displays when selecting the answer: "Yes"

# Q\_12625

Has the applicant or project been awarded funding in prior CFA rounds?

- Question Header. Prior CFA Funding
   Question Type: Basic
   Required: Ves
   Answer Type: Yes/No
   This is a conditional question.

  1. If Yes is selected then Q\_2362 will be displayed

# Q 2362

What were the CFA numbers for which funding was awarded? (separate multiple CFA numbers with commas)

- Question Type: Basic
   Required: No

- Answer Type: Short Answer
   This is a conditional question based on the answer to <u>0\_12625</u>. This question displays when selecting the answer: "Yes'

#### Q 4160

For each program to which you are applying under the CFA, explain your strategy for proceeding if the full amount of requested funding, required matching funds, and temporary financing are not secured as expected, or committed sources become unavailable. This explanation must address any proposed project phases, and both CFA and non-CFA sources of funds.

- Question Type: Basic
   Required: Yes
   Answer Type: Long Rich Text (HTML)
   Characters: 1 5000

#### Q 13140

Pre-Submission Form Certification

- Question Type: Attachment
   Required: Yes
   Answer Type: Attachment
   Question Requirements:
- Complete the form in the link and upload as an attachment.

#### Q\_13141

Preliminary Budget Table

- Question Type: Attachment
   Required: Yes
   Answer Type: Attachment

#### Q 13199

Microenterprise Job Creation/Retention Table

- Question Type: Attachment
   Required: Yes
   Answer Type: Attachment

### Q\_13150

Citizen Participation Compliance Materials - Note that If any of the required documents are not submitted with the application, they cannot be submitted after the application period closes, and the application will be deemed ineligible. Refer to the "scoring tips" section for additional guidance. Materials must include the following: • Evidence of conspicuous public posting (see scoring tips) • Public hearing notice • Affidavit of public hearing notice (see scoring tips) • Public hearing minutes/evidence of a full quorum

- Question Type: Attachment
   Required: Yes
   Answer Type: Attachment
   Question Requirements:

Applicants must meet the citizen participation requirements at 24 CFR 570.486 and NYS Homes and Community Renewal's Citizen Participation Plan as amended, which require Applicants to follow a citizen participation plan. Prior to submitting a CDBG application, Applicants must issue a public hearing notice and hold one public hearing (one in each jurisdiction of a joint application) allowing for citizen feedback on the community and economic development needs of the applicant community and any proposed oppoints). When issuing the notice and holding the public hearing, please note the following:

All hearings must also be conducted in accordance with the New York State Open Meetings Law (Public Officers Law, Article 7)

The municipality must provide a minimum seven (7) day period between the publication of the hearing notice and the hearing itself. Note that the date of publication is day "zero."

The hearing notice must be conspicuously posted in one or more public locations at least seventy-two (72) has prior to the actual hearing. This may also be accomplished by posting to the municipal website

The hearing must be conducted by a quorum of the legislative body of the municipality only, not by a sub recipient, department or arm of the applicant

The notice for the hearing musts specifically mention the municipality is intent to apply for NYS CDBG funds and the current program year. Which may include Housing, Public Infrastructure/Facilities, Economic Development, or Community Planning

Public hearings must be held in a location accessible to persons with disabilities and/or provide reasonable accommodations to allow all interested parties to participate

The municipal resolution auditorizing the public hearing, the hearing notice, affidavit of publication, list of attendees, hearing minutes, and evidence of conspicuous public posting must be included as an attachment to the application

A copy of the application must be available for public inspection at the municipal offece(s).

Applicants may also refer to the "Public Hearing Requirements" document located here: https://hcr.ny.gov/community-development-block-grant#forms-and-documents

### Q 13158

Written documentation of support for the project

- Question Type: Attachment
   Required: Yes
   Answer Type: Attachment

# Q\_13146

Applicant Certification Form

- Question Type: Attachment
   Required: Yes
   Answer Type: Attachment
   Question Requirements:

The form can be found at:

elopment-block-gra

# Q\_13176

Applicant/Recipient Disclosure/Update Form

- Question Type: Attachment
   Required: Yes
   Answer Type: Attachment
   Question Requirements:

# Q\_13148

Program Income Report Form

- Question Type: Attachment
   Required: Yes
   Answer Type: Attachment

· Question Requirements:

#### Q 13177

Project Team

- Question Type: Attachment
   Required: Yes
   Answer Type: Attachment
   Question Requirements:

Please attach form 8-1, Project Team, found on the OCR website: https://hcr.ny.gov/community

#### Q 13152

Civil Rights - Documentation of Affirmatively Furthering Fair Housing compliance. Refer to the application tips for additional information

- Question Type: Attachment
   Required: Yes
   Answer Type: Attachment
   Question Requirements:

Fair Housing - All applicants are required to report whether within the past ten (10) years they have been the subject of any housing discrimination proceeding before a federal, states, and/or local adjudicatory body. The applicant shall:

A. Provide the final disposition or indicate that the proceeding is pending;

B. Provide a brief description of the complaint and procedural history for cases that are pending or the final administrative and/or court orders.

#### Q 13153

Civil Rights - Documentation of Section 3 compliance. Refer to the scoring tips for additional information

- Question Type: Attachment
   Required: No
   Answer Type: Attachment
   Question Requirements:

Section 3 - For all proposed projects that would result in CDBG assistance in excess of \$200,000, applicants must submit a Section 3 Compliance Plan. The Section 3 compliance plan describes the manner in which recipients of CDBG financial assistance will, to the greatest extent possible, provide job training, employment, and contract opportunities for low- or very-low income residents in connection with projects and activities in their neighborhoods.

A sample Compliance Plan is available at: http

Please refer to the CDBG CFA Application Guidance for further information on Fair Housing and Section 3 requirements.

#### Q 13154

Commitment letter(s) from all other funding sources, including proposed terms. This documentation must evidence the availability of all funds including owner equity

- Question Type: Attachment
   Required: Yes
   Answer Type: Attachment

# Q 13155

Documentation of unsuccessful attempts at pursuing non-CDBG funding sources

Refer to the Scoring Tips for additional guidance.

- Question Type: Attachment
   Required: Yes
   Answer Type: Attachment
   Question Requirements:

This documentation could include, but may not be limited to, denial/rejection letters from banks or letters from any other agencies indicating that funding requests were not approved

# Q\_13184

Program Design Plan.

- Question Type: Attachment
   Required: Yes
   Answer Type: Attachment
   Question Requirements:

Applicants proposing microenterprise activities must submit a Program Design Plan that describes how the proposed activities will be implemented. The Program Design Plan should provide a clear and detailed description of the following program elements:

- 1. Eligibility Explain who is eligible to participate, the process that will be followed to verify participant eligibility, and what activities are eligible under the program.
- 2. Funding Describe the terms and conditions for providing assistance, and the means of securing compliance during the regulatory term
- 3. Marketing and Supporting Activities Describe program marketing and outreach efforts. Summarize any unique program design features or additional administrative support for the program (such as business counseling, job training, etc.) that will increase the likelihood of successful completion.
- 4. Entrepreneurial Training Requirement Describe the entrepreneurial assistance or small business training program each microenterprise must complete prior to receiving NYS CDBG Microenterprise funds. See Entrepreneurial Training Requirement under Section VII of the NYS CDBG Microenterprise Program Guidelines for additional guidance on the training requirement.
- 5. Program Objectives and Impact Provide a detailed description of all appropriate quantifiable information and any unique aspects. Examples of quantifiable information are the number of grants to be made, the number of low- and moderate-income owners to be assisted, and the number of jobs to be created. Describe how the benefits of the program will be sustained, resulting in long-term benefits.
- 6. Program Oversight and Grant Approvals Provide a clear demonstration of the expertise to manage the grant fund program and identify other resources that will be made available to the participants. In addition, describe the grant approval process and a list of individuals who will be involved in the selection and approval process. The Recipient's Microenterprise Grant Committee should be diverse and include qualified individuals from related professions, such as bankers, business owners, attorneys, etc. For more information, reference the NYS CDBG Microenterprise Program Guidelines Glocated here:

  "https://dx.rug.gov/community-development-block-grant-economic-development-program."

# Q\_13179

Entrepreneurial training program syllabus

- Question Type: Attachment
   Required: Yes
   Answer Type: Attachment
   Question Requirements:

#### **Entrepreneurial Training Requirement**

Each microenterprise owner that is awarded a grant must complete an entrepreneurial training class prior to incurring project costs and requesting CDBG grant funds. Owner(s) of the microenterprise must attend the entrepreneurial training. Attendance by the employees does not satisfy this requirement. If the microenterprise is owned and operated by more than one individual, at least one person must complete the training program.

The training requirement must be a classroom-style training that teaches the fundamentals of owning and operating a business. The training program should help entrepreneurs develop business skills. At minimum, the training program should consist of the following elements:

- Developing a business planLegal issues

- Taxes
   Recordkeeping
   Accounting
   Financing
   Marketing, advertising
   Employee issues

NYS CDBG Microenterprise training funds cannot be used to subsidize the cost of conducting a training program. NYS CDBG funds may used to reimburse the microenterprise business owner(s) for participating in an entrepreneurial training course. Reimbursement will not occur until the owner has successfully completed the course and has been awarded a NYS CDBG Microenterprise grant.

### Q\_13181

Draft program application and any other applicable forms that are to be completed by each microenterprise program applicant.

- Question Type: Attachment
   Required: Yes
   Answer Type: Attachment
   Question Requirements:

This attachment is a draft of the application and any other materials that you will require microenterprise program applicants to complete in order to be considered for assistance. Please note that it is the responsibility of the Recipient to underwrite ach grant application. The purpose of the underwriting is to select microenterprise projects which are financially visable and make the most effective use of the NYS CDBG Microenterprise funds. In addition to HUD's underwriting criteria, the grants provided must be underwriting underwriting riteria. The draft application should request the required underwriting. Refer to the NYS CDBG Microenterprise Program Guidelines for additional guidance on the Program and the underwriting requirements:

# Q\_13178

Draft Grant Agreement Between Recipient and Business(es).

- Question Type: Attachment
   Required: Yes
   Answer Type: Attachment

# Q\_13182

List of grant committee members and experience (Grant committee is a panel chosen by the applicant to review grant applications and to make recommendations and/or approval of grant awards)

- Question Type: Attachment
   Required: Yes
   Answer Type: Attachment
   Question Requirements:

The Recipient's Microenterprise Grant Committee should be diverse and include qualified individuals from related professions, such as bankers, business owners, attorneys,

#### Q\_13183

Documentation for all third party costs (Applicants proposing Microenterprise Programs that include soft costs such as classroom instruction, technical assistance to businesses, marketing, etc. must provide supporting cost documentation).

- Question Type: Attachment
   Required: Yes
   Answer Type: Attachment

# Q\_13163

If the applicant has already entered into an agreement with a qualified Not-for-Profit subrecipient, please attach a Vendor Responsibility Questionnaire (VRQ)

- Question Type: Attachment
   Required: No
   Answer Type: Attachment
   Question Requirements:

The appropriate forms can be found on the NYS Comptroller's Office website here:

# Q\_13167

If the project includes the expansion of municipal infrastructure, attach the Smart Growth Compliance Form.

- Question Type: Attachment
   Required: No
   Answer Type: Attachment
   Question Requirements:

The form can be found at:

# Q\_3945

ContactNamePreparer

- Question Type: Standard Question
   Required: Yes
   Answer Type: Short Answer

### Q\_3962

ContactNameSubrecipient

- Question Type: Standard Question
   Required: No
   Answer Type: Short Answer

### Q\_3949

TitlePreparer

- Question Type: Standard Question
   Required: Yes
   Answer Type: Short Answer
- Q\_3950

TitleSubrecipient

Question Type: Standard Question

- Required: No Answer Type: Short Answer
- Q\_3947

# OrganizationPreparer

- Question Type: Standard Question
   Required: Yes
   Answer Type: Short Answer

### Q\_3948

OrganizationSubrecipient

- Question Type: Standard Question
   Required: No
   Answer Type: Short Answer

# Q\_3951

AddressPreparer

- Question Type: Standard Question
   Required: Yes
   Answer Type: Short Answer

### Q\_3952

AddressSubrecipient

- Question Type: Standard Question
   Required: No
   Answer Type: Short Answer

### Q\_3953

ZipCodePreparer

- Question Type: Standard Question
   Required: Yes
   Answer Type: Short Answer

# Q\_3954

ZipCodeSubrecipient

- Question Type: Standard Question
   Required: No
   Answer Type: Short Answer

# Q 3955

TelephonePreparer

- Question Type: Standard Question Required: Yes Answer Type: Phone

### Q\_3956

TelephoneSubrecipient

- Question Type: Standard Question
   Required: No
   Answer Type: Phone

#### Q 3957

EmailPreparer

- Question Type: Standard Question
   Required: Yes
   Answer Type: Email

# Q\_3958

EmailSubrecipient

- Question Type: Standard Question
   Required: No
   Answer Type: Short Answer

# Q\_3154

HTFCFirst

- Question Type: Standard Question
   Required: Yes
   Answer Type: Short Answer

- Question Type: Standard Question
   Required: Yes
   Answer Type: Short Answer

HTFCTitle

- Question Type: Standard Question
   Required: Yes
   Answer Type: Short Answer

# Q\_3157

HTFCAddress1

- Question Type: Standard Question
   Required: Yes
   Answer Type: Short Answer

# Q\_3158

HTFCAddress2

- Question Type: Standard Question
   Required: No
   Answer Type: Short Answer

# Q\_3159

HTFCCity

- Question Type: Standard Question
   Required: Yes
   Answer Type: Short Answer

Q\_3160 HTFCZip

- Question Type: Standard Question
   Required: Yes
   Answer Type: Integer

# Q\_3161

HTFCPhone

- Question Type: Standard Question
   Required: Yes
   Answer Type: Phone

# Q\_3162

HTFCEmail

- Question Type: Standard Question
   Required: Yes
   Answer Type: Email

# Q\_3905

StartGA

- Question Type: Standard Question
   Required: Yes
   Answer Type: Date

# Q\_3906

EndGA

- Question Type: Standard Question
   Required: Yes
   Answer Type: Date

### Q\_3907

StartERR

- Question Type: Standard Question Required: Yes Answer Type: Date
- Q\_3908

EndERR

- Question Type: Standard Question
   Required: Yes
   Answer Type: Date

# Q\_3909

StartActivities

- Question Type: Standard Question
   Required: Yes
   Answer Type: Date

#### EndActivities

- Question Type: Standard Question
   Required: Yes
   Answer Type: Date

#### Q 3911

StartReimbursements

- Question Type: Standard Question
   Required: Yes
- Answer Type: Date

### Q\_3912

EndReimbursement

- Question Type: Standard Question
   Required: Yes
   Answer Type: Date

#### Q 3913

StartJopReporting

- Question Type: Standard Question
   Required: Yes
   Answer Type: Date

#### Q 3914

EndJobReporting

- Question Type: Standard Question
   Required: Yes
   Answer Type: Date

# Q 3915

EndCompletion

- Question Type: Standard Question
   Required: Yes
   Answer Type: Date

### Q\_13195

Please provide the Federal Tax ID and the DUNS number and/or the Unique Entity ID for the Unit of Government serving as the Applicant.

- Question Type: Standard Question
  Required: Yes
  Answer Type: Long Rich Text (HTML)
  Characters: 0 500
  Question Requirements:

DUNS Number: http

Unique Entity ID: ht

### Q\_13186

Provide a project abstract. The abstract must include formal applicant name, location of project, amount of request, business to be assisted, jobs to be created and general purpose of project. Sample text: [City, Town, Village, County Name] will use \$200,000 in NYS CDBG funds to assist in the establishment of [Program Name]. The total program cost will be \$225,000 with \$25,000 from owner equity. The program proposes to assist 10 microenterprises, of which 5 will be owned by LMI owners. Additionally, the program proposes to create 5 full-time LMI jobs.

- Question Type: Standard Question
   Required: Yes
   Answer Type: Long Answer
   Characters: 0 400

#### Q 13122

Provide a brief description of the community's economic development needs including a discussion of economic trends and the community's plan to address the needs identified

Refer to the Help section for a detailed list of information required to answer the question completely

- Question Type: Standard Question
   Required: Yes
   Answer Type: Long Rich Text (HTML)
   Characters: 0 6000
- Question Requirements:

The description should include the following:

- A description of existing industry in the community (i.e. warehousing, manufacturing, agriculture);

  Demographic information including median family income and percentage of persons in poverty;

  A description of the labor force needs, including a discussion of the unemployment rate in the community and region, and the skills available or lacking in the labor market;

  The most recent calendar year's county-wide unemployment data as provided by the New York State Department of Labor. Provide data for yearly and monthly averages;

  A description of disinvestment in the community, as evidenced by recent business closures over the later they ears;

  An explanation of how the proposed project supports designated Empowerment Zones, Enterprise Communities, NYS Excelsior Program and NYS Empire Zones;

  Description of the proposed project's relationship to other community development activities underway or planned;

  Description of any municipal strategic or comprehensive redevelopment plans; long-range strategy or community needs assessment.
- needs assessment.

  Explain why the proposed project is the best approach to addressing the need identified. Provide the date the plan(s) was adopted and the term of the plan. Do not submit plans, strategies or surveys with your application;
  Explain how the project will support or complement other public works, housing, economic development, main street revitalization or other community goals, particularly those that benefit (direct or indirect) LMI persons

# Q 13185

Provide a detailed explanation of the project need and impact.

The description should be specific and provide sufficient detail concerning:

- the nature, scope, location, and purpose of activities that will be addressed by the proposed project and coordination of related activities;
   any past efforts to resolve the needs identified;
   any limitations on funding or other resources to address the need identified;
   why the proposed project is the best approach to addressing the need identified; and
   quantifiable information, such as how CDBG funding will be provided to the beneficiary (loan, grant, terms, etc.); impact on residents, suppliers or end users, etc.

- Question Type: Standard Question
   Required: Yes
- Answer Type: Long Rich Text (HTML) Characters: 0 6000

#### Q 13124

Please identify and explain any components of the proposed project that have been started as of the submission of this application, as well as any subsequent activities that are part of the total project. Indicate the actual or anticipated start and end dates for all of the

Please note: If any project costs, regardless of their funding source, are incurred prior to the CDBG award date and the approval of the Request for Release of Funds by the Office of Community Renewal, the entire project may be deemed ineligible for NYS CDBG funds.

- Question Type: Standard Question
   Required: Yes
   Answer Type: Long Rich Text (HTML)
   Characters: any

#### O 13127

Describe efforts to secure alternative or additional funds from all appropriate public or private sources available to assist in financing the proposed activity. In detail, explain the impact of the NYS CDBG funds on the total cost of the project and the beneficiaries (e.g. lack of other sources of funding). List the sources of cost estimates (where appropriate, project costs should be as recent as possible and documented by a qualified third party). If the project is subject to review or provided funds by other agencies, organizations, or authorities, what is the status of any on-going consultations?

- Question Type: Standard Question
- Required: Yes
   Answer Type: Long Rich Text (HTML)
   Characters: 1 3000

#### Q 13187

Explain the proposed NYS CDBG program budget. Identify each of the estimated costs, including the source of the funds and proposed use: purchase of furniture and fixtures, machinery and equipment, working capital, etc. For each source identified, indicate whether the source is formally committed or pending approval. Please be specific, and list each source in a consistent format.

This explanation of your program budget must be consistent with the budget table included as an attachment to this application. If a source is identified as committed, the applicable commitment letter must be attached where requested in the application

- Question Type: Standard Question
   Required: Yes
   Answer Type: Long Rich Text (HTML)
   Characters: any

### O 13188

Provide a detailed description of the program delivery and administration tasks required to undertake this project including who will undertake these tasks, the costs associated with the tasks, and how the costs were determined. Provide the actual amount of program delivery and administrative funds allocated to the project from the State CDBG funds requested.

- Question Type: Standard Question
   Required: Ves
- Answer Type: Long Rich Text (HTML) Characters: 0 2000
- Question Requirements:

For the Microenterprise Program, an applicant may request **up to 15%** of the total CDBG grant amount to cover grant administration costs, program delivery costs and entrepreneurial training reimbursement costs. Of the 15% maximum, administration costs **cannot exceed 5%** of the total CDBG grant amount requested.

Grant Administration Costs may include:

- Providing local officials and citizens with information about the program;

  Preparing program budgets and schedules and amendments thereto;

  Developing systems for assuring compliance with program requirements;

  Costs associated with the Environmental Review Process for the overall program, including the release of funds.

  Preparing Requests for Proposals with consultants for grant administration or other consulting work, such as architectural or Engineering services.

  Developing interagency agreements and agreements with sub recipients and contractors to carry out program activities;

  Wonintoring program activities for progress and compliance with program requirements;

  Preparing reports and other documents for submission to the State regarding the grant;

  Coordinating the resolution of audit and monitoring findings.

- Preparing reports and other documents for submission to the State regarding the grant;

  Coordinating the resolution of audit and monitoring findings;

  Evaluating program results against State objectives; and

  Managing or supervising persons whose primary responsibilities with regard to the program include such assignments as those described above;

  Costs incurred for official business travel in carrying out the program and administrative services performed under a third party contract.

  Purchase of capital equipment, such as file cabinets, for grant administration

  Training on CDBG grant administration requirements

  General operating expenses are incligible for reimbursement from the grant funds.

Program Delivery Costs are those costs that can be directly attributed to activities for delivery of specific proposed activities such as:

- Marketing grant activities;

  Services verifying client eligibility;

  Providing education or counseling to beneficiaries;

  Preparation of site specific environmental review and environmental assessment;

  Preparation of loan closing documents, all costs associated with perfecting security, repayment processing, loan disbursement;

  Professional service fees including engineering and architectural fees required to deliver the program and review of project documentation, etc.

  Legal expenses related to construction such as temporary or permanent easements and filing fees;

  Any required building or regulatory permit or fees associated with regulatory compliance;

  Client/contractor troubleshooting; and

  Any other professional services required to deliver the program. These include in-house staff or third party costs.

Reference the NYS Office of Community Renewal Grant Administration Manual, Chapter 3, for examples of Grant Administration and Program Delivery Costs: <a href="https://ber.ny.gov/community-development-block-grant-economic-development-program">https://ber.ny.gov/community-development-block-grant-economic-development-program</a>. OMB Circular A-87 establishes principles and standards for determining whether specific costs are allowable under the NYS CDBG program. The uniform approach established in this circular for determining costs promotes effective program delivery and efficient

# O 13189

How will the proposed project comply with the NYS CDBG Microenterprise Program Guidelines? Address each guideline specific to the activity being proposed individually in your response

- Question Type: Standard Question
   Required: Yes
   Answer Type: Long Rich Text (HTML)
   Characters: 0 2500
- Question Requirements
- Microenterprise Program
- The maximum total allocation for which a community can apply is \$300,000.
- A minimum of 50% of a total allocation (less grant administration costs) must be awarded to start-up businesses. A start up business is one which has been in operation less than six (6) months
- NYS CDBG Microenterprise funds must be allocated as a grant to each microenterprise.
- Grant assistance to an individual microenterprise must be between \$5,000 and \$35,000.
- Each microenterprise assisted by this program must either create at least one full-time equivalent job for a low- and moderate-income person or the owner(s) of the microenterprise must qualify as low- and moderate-income
- At least 51% of the jobs created by each microenterprise must benefit low- and moderate-income persons
- Grants may not exceed 90% of the total project cost to assist in the start-up or expansion of a microenterprise.
- A minimum amount of 10% owner equity contribution to each microenterprise project is required.
- Each microenterprise owner must complete an approved entrepreneurial assistance or small business training program prior to receiving CDBG Microenterprise grant funds. The cost for the owner to attend the training may be an eligible CDBG expense.

NOTE: The maximum awards are not intended to serve as a target figure for requests for assistance. The amount of CDBG assistance should be based on need and CDBG funds should not be used to reduce the amount of non-federal financial support for the project. Reference the CDBG ED Program Guidelines for additional guidance: https://bcr.nv.gov/community.development-block-grant-economic-development-program.

How will the Microenterprise Program meet the requirement that at least 50% of the total CDBG award (less grant administration costs) must fund start-up businesses? A start-up business is defined as a business that has been in operation for less than 6 months prior to submitting their application to the NYS CDBG Microenterprise Program.

- Question Type: Standard Question
   Required: Yes
- Answer Type: Long Answer Characters: 0 250

#### Q\_13191

Describe how the applicant will evaluate potential microenterprise projects according to the required underwriting guidelines for evaluating project costs and financial requirements.

Address each of the underwriting guidelines below in your response:

- 1. That project costs are reasonable;
  2. That all sources of project financing are committed;
  3. That to the extent practicable, CDBG funds will not be substituted for non-federal financial support;
  4. That the project is financially feasible;
  5. That to the extent practicable, the return on the owner's equity investment will not be unreasonably high; and
  6. That to the extent practicable, CDBG funds will be disbursed on a pro rata basis with the other financing.

Please be specific as to what information and/or documentation will be required from microenterprise applicants and what types of analysis will be performed.

- Question Type: Standard Question
   Required: Yes
   Answer Type: Long Rich Text (HTML)
   Characters: 0 3000
- Question Requirements:

Reference Appendix A to 24 CFR Part 570 - Guidelines and Objectives for Evaluating Project Costs and Financial Requirements for further guidance.

https://www.ecfr.gov/current/title-24/part-570

#### Q 13193

What is the estimated number of jobs that the proposed Microenterprise Program will create? Please note job retention is not eligible under the NYS CDBG Microenterprise Program.

- Question Type: Standard Question
   Required: Yes
   Answer Type: Integer
   Question Requirements:

In counting the jobs, the following policies apply: Part-time jobs must be converted to full-time equivalents (FTE). An FTE is any combination of two or more part-time jobs that, when combined together, constitute the equivalent of a job of at least 40 hours

Only permanent jobs count; temporary jobs may not be included; Seasonal jobs are considered to be permanent for this purpose only if the season is long enough for the job to be considered the employee's principal occupation; All permanent jobs created by the activity must be counted even if the activity has multiple sources of funds; Jobs indirectly created by an assisted activity may not be counted; and A Business Owner cannot be counted towards job creation.

#### Q 13194

Describe how the applicant and business will comply with the job reporting requirements contained in the NYS OCR Grant Administration Manual

- Question Type: Standard Question
  Required: Yes
  Answer Type: Long Rich Text (HTML)
  Characters: 0 4000
  Question Requirements:

Reference Chapter 11, "Reporting Requirements" of the NYS OCR Grant Administration Manual for guidance on job reporting requirements. The Manual can be found online, here:

### Q 13157

I certify that I understand that, once awarded, all persons applying for a job, not just those categorized as LMI, are required to fill out a Family Income Form and that these forms should be maintained within the files. The Family Income Form is available in the link

- Question Type: Standard Question
- Required: Yes
   Answer Type: Yes/No
   Question Requirement

The HUD Family Income limits are updated each calendar year. The limits for each year are available here: http://www

#### Q 13196

I certify that I understand all communities are required to establish scoring criteria for the selection of Microenterprise applicants. The scoring criteria serves as an evaluation system for selecting the most qualified and capable applicants

- Question Type: Standard Question
   Required: Yes
   Answer Type: Yes/No

#### O 13168

I understand that NYS Homes and Community Renewal may require additional project information or modifications to the original project proposal as a condition of award.

- Question Type: Standard Question
   Required: Yes
   Answer Type: Yes/No

# O 13169

By entering your name in the box below, you certify and agree that you are authorized on behalf of the applicant and its governing body to commit the applicant to comply with the requirements of Article 15-A of the New York State Executive Law: Participation By Minority Group Members and Women With Respect To State Contracts by providing opportunities for Minority-owned Business Enterprise (MBE) Woman-owned Business Enterprise (WBE) participation. You further certify that the applicant will maintain such records and take such actions necessary to demonstrate such compliance throughout the completion of the projection of the projection

- Question Type: Standard Question
   Required: Yes
   Answer Type: Short Answer

### Q\_13170

By entering your name in the box below, you certify that you are authorized on behalf of the applicant and its governing body to submit this application. You further certify that all of the information contained in this Application and in all statements, data and supporting documents which have been made or furnished for the purpose of receiving Assistance for the project described in this application, are true, correct and complete to the best of your knowledge and belief. You acknowledge that offering a written instru knowing that the written instrument contains a false statement or false information, with the intent to defraud studied subdivision, public authority or public benefit corporation of the State, with the knowledge or belief that it will be filed with or recorded by the State or any political subdivision, public authority or public benefit corporation of the State, constitutes a crime under New York State Law.

- Question Type: Standard Question
   Required: Yes
   Answer Type: Short Answer